

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT

ID - 73476795 87200

Please type or print in ink.

**STATEMENT OF ECONOMIC INTERESTS**



FAIR POLITICAL  
PRACTICES COMMISSION  
**COVER PAGE**

12 APR -5 AM 11:12

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**MAR 13 2012**

STEPHEN L. VAGNINI  
MONTEREY COUNTY CLERK  
DEPUTY

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
POTTER, DAVE

**1. Office, Agency, or Court**

Agency Name

Monterey County Board of Supervisors

Division, Board, Department, District, if applicable

Your Position

5th District

Supervisor

► If filing for multiple positions, list below or on an attachment.

Agency: \*SEE ATTACHED FOR ADDITIONAL POSITIONS

Position: \_\_\_\_\_

**2. Jurisdiction of Office (Check at least one box)**

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☒ County of Monterey

☐ City of \_\_\_\_\_

☐ Other \_\_\_\_\_

**3. Type of Statement (Check at least one box)**

☒ Annual: The period covered is January 1, 2011, through  
December 31, 2011

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through  
December 31, 2011.

☐ Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

☐ The period covered is January 1, 2011, through the date of  
leaving office.

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date  
of leaving office.

☐ Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 7

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is

I certify under penalty of perjury under the laws of the State of California that

Date Signed 03/09/2012  
(month, day, year)

Signature

Section 1 Additional Agency(ies)/Position(s) for POTTER, DAVE:

Agency	Position
Natividad Medical Center	Board Member
Transportation Agency of	Board Member
Monterey Peninsula Water	Board Member
Fort Ord Reuse Authority	Board Member
Monterey County Visitors and	Board Member
Water Resources Agency	Board Member
Redevelopment Agency	Board Member
Carmel Valley Sanitation District	Board Member
Moss Landing Sanitation District	Board Member
Boronda Sanitation District	Board Member
Pajaro Sanitation District	Board Member
Coast Rail Coordinating Council	Board Member
Arts Council for Monterey County	Alternate Board Member
CA State Association of Counties	Alternate Board Member
Seaside Basin Watermaster Board	Board Member
County of Monterey	Board of Supervisor
Workforce Investment Board	Board Member

**SCHEDULE A-2**  
**Investments, Income, and Assets**  
**of Business Entities/Trusts**  
(Ownership Interest is 10% or Greater)

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name

POTTER, DAVE

**▶ 1. BUSINESS ENTITY OR TRUST**

Potter Construction

Name  
215 W. Franklin Street Suite 316  
Monterey CA 93940

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☒ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

Construction Company

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☒ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

ACQUIRED

DISPOSED

NATURE OF INVESTMENT

☒ Sole Proprietorship    ☐ Partnership    ☐ Other

YOUR BUSINESS POSITION Owner

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

- ☐ \$0 - \$499    ☒ \$10,001 - \$100,000  
☐ \$500 - \$1,000    ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

Sanford Edward

Safwat Malek

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT    ☐ REAL PROPERTY

Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

ACQUIRED

DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold \_\_\_\_\_  
Yrs. remaining

☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

**▶ 1. BUSINESS ENTITY OR TRUST**

Name

Address (Business Address Acceptable)

Check one

☐ Trust, go to 2    ☐ Business Entity, complete the box, then go to 2

**GENERAL DESCRIPTION OF BUSINESS ACTIVITY**

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$0 - \$1,999  
☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

ACQUIRED

DISPOSED

NATURE OF INVESTMENT

☐ Sole Proprietorship    ☐ Partnership    ☐ Other

YOUR BUSINESS POSITION \_\_\_\_\_

**▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)**

- ☐ \$0 - \$499    ☐ \$10,001 - \$100,000  
☐ \$500 - \$1,000    ☐ OVER \$100,000  
☐ \$1,001 - \$10,000

**▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)**

**▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD BY THE BUSINESS ENTITY OR TRUST**

Check one box:

☐ INVESTMENT    ☐ REAL PROPERTY

Name of Business Entity, if Investment, or  
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or  
City or Other Precise Location of Real Property

FAIR MARKET VALUE

IF APPLICABLE, LIST DATE:

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

ACQUIRED

DISPOSED

NATURE OF INTEREST

☐ Property Ownership/Deed of Trust    ☐ Stock    ☐ Partnership

☐ Leasehold \_\_\_\_\_  
Yrs. remaining

☐ Other \_\_\_\_\_

☐ Check box if additional schedules reporting investments or real property are attached

Comments:

Additional Single Sources of Income of \$10,000 or more for Potter Construction

Scott Kivel

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>POTTER, DAVE</u>

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME <u>Portola Hotel and Spa</u>	NAME OF SOURCE OF INCOME _____
ADDRESS (Business Address Acceptable) <u>2 Portola Plaza</u> <u>Monterey CA 93940</u>	ADDRESS (Business Address Acceptable) _____
BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Hospitality</u>	BUSINESS ACTIVITY, IF ANY, OF SOURCE _____
YOUR BUSINESS POSITION <u>General Manager</u>	YOUR BUSINESS POSITION _____
GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input checked="" type="checkbox"/> OVER \$100,000	GROSS INCOME RECEIVED <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input checked="" type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <span style="margin-left: 150px;">(Real property, car, boat, etc.)</span> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <input type="checkbox"/> Other _____ <span style="margin-left: 150px;">(Describe)</span>	CONSIDERATION FOR WHICH INCOME WAS RECEIVED <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership <input type="checkbox"/> Sale of _____ <span style="margin-left: 150px;">(Real property, car, boat, etc.)</span> <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more _____ <input type="checkbox"/> Other _____ <span style="margin-left: 150px;">(Describe)</span>

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*	INTEREST RATE	TERM (Months/Years)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable) _____	SECURITY FOR LOAN <input type="checkbox"/> None <input type="checkbox"/> Personal residence	
BUSINESS ACTIVITY, IF ANY, OF LENDER _____	<input type="checkbox"/> Real Property _____ <span style="margin-left: 150px;">Street address</span> _____	_____
HIGHEST BALANCE DURING REPORTING PERIOD <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	<input type="checkbox"/> Guarantor _____	_____
	<input type="checkbox"/> Other _____ <span style="margin-left: 150px;">(Describe)</span>	

Comments: \_\_\_\_\_

# SCHEDULE D Income – Gifts

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

POTTER, DAVE

► NAME OF SOURCE

AT&T ProAm Tournament

ADDRESS (Business Address Acceptable)

270 17 Mile Drive

Pebble Beach CA 93953

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Charity Golf Tournament

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02/13/11	\$ 100.00	Golf Tournament Tickets & Lunch
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Cannery Row Company

ADDRESS (Business Address Acceptable)

765 Wave Street

Monterey CA 93940

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Properties & Restaurants

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11/22/11	\$ 50.00	Flowers
12/22/11	\$ 40.00	Holiday Flowers
04/25/11	\$ 40.00	Holiday Flowers

► NAME OF SOURCE

Gill Campbell

ADDRESS (Business Address Acceptable)

1021 Highway 68

Salinas CA 93908

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Mazda Raceway Laguna Seca

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
07/24/11	\$ 50.00	Ticket to Race Event
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Pebble Beach Company

ADDRESS (Business Address Acceptable)

PO Box 1522

Pebble Beach CA 93953

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Hospitality

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
08/21/11	\$ 150.00	Concours d'Elegance Brunch
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Bill Shaw

ADDRESS (Business Address Acceptable)

3 Quail Run Circle

Salinas CA 93908

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Real Estate Development

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12/15/11	\$ 40.00	Poinsettia
/ /	\$	
/ /	\$	

► NAME OF SOURCE

Catholic Charities

ADDRESS (Business Address Acceptable)

922 Hilby Avenue

Seaside CA 93955

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Charity Organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10/23/11	\$ 50.00	Dinner ticket
/ /	\$	
/ /	\$	

Comments:

# SCHEDULE D Income - Gifts

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

POTTER, DAVE

► NAME OF SOURCE

Denise Duffy and Associates

ADDRESS (Business Address Acceptable)

947 Cass Street Suite 5

Monterey CA 93940

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Planning

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
-----------------	-------	------------------------

<u>12/22/11</u>	<u>\$ 20.00</u>	<u>Box of chocolates</u>
-----------------	-----------------	--------------------------

<u>  /  /  </u>	<u>\$</u>	<u> </u>
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<u>  /  /  </u>	<u>\$</u>	<u> </u>
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► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
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<u>  /  /  </u>	<u>\$</u>	<u> </u>
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<u>  /  /  </u>	<u>\$</u>	<u> </u>
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<u>  /  /  </u>	<u>\$</u>	<u> </u>
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► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
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<u>  /  /  </u>	<u>\$</u>	<u> </u>
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<u>  /  /  </u>	<u>\$</u>	<u> </u>
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<u>  /  /  </u>	<u>\$</u>	<u> </u>
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► NAME OF SOURCE

Richard Warren

ADDRESS (Business Address Acceptable)

24405 San Luis Ave.

Carmel CA 93923

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
-----------------	-------	------------------------

<u>12/22/11</u>	<u>\$ 20.00</u>	<u>Box of Chocolates</u>
-----------------	-----------------	--------------------------

<u>  /  /  </u>	<u>\$</u>	<u> </u>
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<u>  /  /  </u>	<u>\$</u>	<u> </u>
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► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
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<u>  /  /  </u>	<u>\$</u>	<u> </u>
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<u>  /  /  </u>	<u>\$</u>	<u> </u>
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► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
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<u>  /  /  </u>	<u>\$</u>	<u> </u>
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<u>  /  /  </u>	<u>\$</u>	<u> </u>
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Comments: